

Docket No. 55732 (71526)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Y. Ikeura et al. EXAMINER: E. J. Webman
SERIAL NO. 09/807,337 GROUP: 1617
FILED: April 10, 2001
FOR: SORBEFACIENTS AND PREPARATIONS FOR PERCUTANEOUS
ABSORPTION CONTAINING THE SAME

Mail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

RESPONSE TO RESTRICTION REQUIREMENT AND SPECIES ELECTION

Applicants are in receipt of the office action dated August 29, 2003 and request reconsideration of the above-identified application in view of the following elections and remarks.

REMARKS

Responsive to the species election required by the office action dated August 29, 2003,
Applicants make the following elections:

Polymer: blends of styrene-isoprene-styrene block copolymer and polyisobutylene.
Active: estradiol

This election is made with the understanding that upon allowance of a generic claim, applicant will be entitled to consideration of claims to additional species which are written in dependent form or otherwise include all the limitations of an allowed generic claim.

OFFICIAL

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SEP 25 2003

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ABSORPTION CONTAINING THE SAMEMail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**AMENDMENT TRANSMITTAL**

1. Transmitted herewith is a Response to the Restriction Requirement for this application.

STATUS

2. Applicant is
[] a small entity. A statement:

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8(a))

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

- ☐ deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

FACSIMILE

- ☒ transmitted to Technology Center 1600 by facsimile (703-872-9306) to the Patent and Trademark Office.


Signature

Date: September 24, 2003

John B. Alexander, Ph.D.
(type or print name of person certifying)

(Amendment Transmittal—page 1 of 4)

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. § 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)					(Col. 2)		(Col. 3) SMALL ENTITY		OTHER THAN A SMALL ENTITY	
Claims Remaining After Amendment		Highest No. Previously Paid For		Present Extra	Rate	Addit. Fee	OR	Rate	Addit. Fee	
Total	Minus	20	=	x \$9 =	\$0			x \$18 =	\$	
Indcp.	Minus	3	=	x \$39 =	\$0			x \$78 =	\$	
[] First Presentation of Multiple Dependent Claim				+ \$130 =	\$0			+ \$260 =	\$	
Total						OR	Total			
Addit. Fee					\$ 0.00		Addit. Fee	\$		

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest No. Previously Paid For" (Total or Indcp.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

WARNING: "After final rejection or action (§ 1.113) amendments may be made canceling claims or complying with any requirement of form which has been made." 37 C.F.R. § 1.116(a) (emphasis added).

(complete (c) or (d), as applicable)

(c) [X] No additional fee for claims is required.

OR

(d) [] Total additional fee for claims required \$ _____.

FEE PAYMENT

5. [] Attached is a check in the sum of \$ _____.
- [X] Charge Account No. 04-1105 the sum of \$ 0.00.
- A duplicate of this transmittal is attached.

(Amendment Transmittal—page 3 of 4)

FEE DEFICIENCY

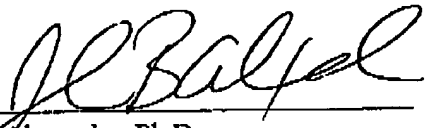
NOTE: If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in returning the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, (1065 O.G. 31-33).

6. ☒ If any additional extension and/or fee is required, charge Account No. 04-1105.
AND/OR
- ☒ If any additional fee for claims is required, charge Account No. 04-1105.

Respectively submitted,

September 24, 2003

By:


John B. Alexander, Ph.D.
Reg. No. 48,399

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